

## PART B - FEE(S) TRANSMITTAL

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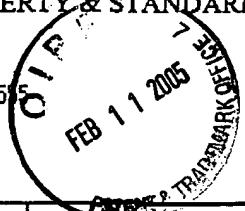
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24737 7590 01/03/2005

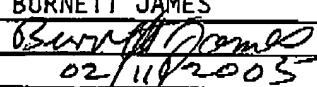
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**BURNETT JAMES**  
  
 02/11/2005

(Depositor's name)

(Signer)

(D)

|                 |             |                      |                     |                  |
|-----------------|-------------|----------------------|---------------------|------------------|
| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 09/933,555      | 08/20/2001  | Pak Chong Tang       | US010061            | 6559             |

TITLE OF INVENTION: OVER-CURRENT PROTECTION CIRCUIT

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|-------------|--------------|-----------|-----------------|------------------|----------|
|-------------|--------------|-----------|-----------------|------------------|----------|

|                |    |        |       |        |            |
|----------------|----|--------|-------|--------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 04/04/2005 |
|----------------|----|--------|-------|--------|------------|

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------|----------|----------------|
|----------|----------|----------------|

|                       |      |            |
|-----------------------|------|------------|
| TIBBITS, PIA FLORENCE | 2838 | 361-093100 |
|-----------------------|------|------------|

|   |   |   |
|---|---|---|
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).<br><input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.<br><input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | 2. For printing on the patent front page, list<br>(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,<br>(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | 1. <u>EDWARD W. GOODMAN</u><br>2. _____<br>3. _____ |
|---|---|---|

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed in accordance as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

KONINKLIJKE PHILIPS  
ELECTRONICS N.V.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Eindhoven, The Netherlands

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

Issue Fee  
 Publication Fee (No small entity discount permitted)  
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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Date 2/10/2005Typed or printed name EDWARD GOODMANRegistration No. 28,613

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